

06/26/01



PTO/SB/05 (08-00)

Please type a plus sign (+) inside this box → ☒Approved for use through 10/31/2002. OMB 0851-0032
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

300p5

First Inventor

Vas

Title

Brush Tilting Mechanism

Express Mail Label No.

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification (Total Pages 14) ☒ I
(Preferred arrangement set forth below)
- Descriptive title of the invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table,
or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 1] ☒ I
5. ☒ Oath or Declaration (Total Pages 1) ☒ I
a. ☒ Newly executed (original or copy)
Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 17 completed)
b. ☒ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s)
named in the prior application, see 37 CFR
1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or
Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
a. ☐ Computer Readable Form (CRF)
b. Specification Sequence Listing on:
i. ☐ CD-ROM or CD-R (2 copies); or
ii. ☐ paper
c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Other: _____

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No. _____

Prior application information:

Examiner _____

Group / Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Labelor ☐ Correspondence address below

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Mark Koch

Registration No. (Attorney/Agent)

44448

Signature

[Signature]

Date

06/13/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

11040 U.S. PTO
09/88549

06/26/01

FEE TRANSMITTAL
for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$)355.00**Complete if Known**

Application Number	
Filing Date	
First Named Inventor	<u>Van/Rosen</u>
Examiner Name	
Group Art Unit	
Attorney/Agent No.	<u>30005</u>

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number	
Deposit Account Name	

- ☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

- ☐ Applicant claims small entity status. See 37 CFR 1.17

2. ☒ Payment Enclosed:

- ☐ Check ☒ Credit card ☐ Money Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Fee Code (1)	Small Entity Fee Code (2)	Fee Description	Fee Paid
101	710	201 355 Utility filing fee	<u>355.00</u>
106	920	908 180 Design filing fee	
107	490	207 245 Plant filing fee	
108	710	208 355 Retissue filing fee	
114	150	214 75 Provisional filing fee	

SUBTOTAL (1) (\$)355.00**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	20** =	x	
Multiple Dependent	3** =	x	

Large Entity Fee Code (1)	Small Entity Fee Code (2)	Fee Description
103	18	203 9 Claims in excess of 20
102	80	202 40 Independent claims in excess of 3
104	270	204 135 Multiple dependent claim, if not paid
109	80	209 40 ** Retissue independent claim over original patent
110	18	210 9 ** Retissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

*or number previously paid, if greater. For Retissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code (1)	Small Entity Fee Code (2)	Fee Description	Fee Paid
105	130	205 85 Surcharge - late filing fee or oath	
127	60	227 25 Surcharge - late provisional filing fee or cover sheet	
139	130	139 130 Non-English specification	
147	2,520	147 2,520 For filing a request for ex parte reexamination	
112	920	112 920 Requesting publication of SIF prior to Examiner action	
113	1,840	113 1,840 Requesting publication of SIF after Examiner action	
116	110	216 85 Extension for reply within first month	
116	880	216 188 Extension for reply within second month	
117	890	217 445 Extension for reply within third month	
118	1,360	218 695 Extension for reply within fourth month	
120	1,880	220 945 Extension for reply within fifth month	
119	310	219 155 Notice of Appeal	
120	910	220 188 Filing a brief in support of an appeal	
121	270	221 135 Request for oral hearing	
138	1,810	138 1,810 Petition to institute a public use proceeding	
140	110	240 85 Petition to revive - unavoidable	
141	1,240	241 620 Petition to revive - unintentional	
142	1,240	242 620 Utility issue fee (or retissue)	
143	440	243 220 Design issue fee	
144	800	244 300 Plant issue fee	
122	130	122 130 Petition to the Commissioner	
123	80	123 50 Petitions related to provisional applications	
126	240	126 240 Submission of Information Disclosure Sheet	
881	40	881 40 Recording each patent assignment per property (limits number of properties)	
148	710	248 355 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249 355 For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279 355 Request for Continued Examination (RCE)	
180	800	180 800 Request for expedited examination of a design application	

Other fee (specify)

Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

Name (Print/Type)	<u>Mark Rosen</u>	Registration No.	<u>111,448</u>	Telephone	<u>549-5880</u>
Signature	<u>Mark Rosen</u>	Address	<u>06/13/64</u>		

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Mark Arthur Koch, M.Eng., P.Eng., L.L.B., Barrister & Solicitor

866 Main Street East, Hamilton, Ontario, Canada L8M 1L9 • Tel:(905) 549-5880 • Fax:(905) 545-2800



June 13, 2001

YOUR FILE NO.

OUR FILE NO. 300p5

Courier Address:

**Re: New Utility Patent Application
2011 South Clark Place
Arlington, Virginia
22202 USA**

Telephone Contact: (703) 308-1202

Mailing address:
The Assistant Commissioner of Patents
Washington, D.C.
20231
U.S.A.

Dear Sirs:

Transmitted herewith for filing is a new utility patent application of:

Inventor: Ed Vaes and Mark Koch
For: BRUSH TILTING MECHANISM

The following papers are enclosed:

16 sheets of specification including 14 claims
17 sheets of informal drawings including 50 drawings

An abstract

Declaration for Utility Patent

New Utility Patent Application Transmittal sheet

Fee Transmittal sheet

Self addressed return card verifying receipt of this package.

Please find enclosed form PTO-2038 Credit Card Payment in the amount of \$355.00.

Yours very truly,

Mark Arthur Koch

44,448

MAK:pf

Encl.

F:\WPMARK\PAT\300P5US.TL1